

### ***Caution: DRAFT FORM***

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If you have any comments on this draft form, you can submit them to us on our web site. Include the word DRAFT in your response. You may make comments anonymously, or you may include your name and e-mail address or phone number. We will be unable to respond to all comments due to the high volume we receive. However, we will carefully consider each suggestion. So that we can properly consider your comments, please send them to us within 30 days from the date the draft was posted.

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VOID



CORRECTED

PAYER'S name, street address, city, state, ZIP code, and telephone no.		1 Unemployment compensation	OMB No. 1545-0120  <b>2005</b> Form <b>1099-G</b>	<b>Certain Government Payments</b>  <b>Copy A</b> <b>For Internal Revenue Service Center</b> <b>File with Form 1096.</b> For Privacy Act and Paperwork Reduction Act Notice, see the <b>2005 General Instructions for Forms 1099, 1098, 5498, and W-2G.</b>
		\$		
2 State or local income tax refunds, credits, or offsets		3 Box 2 amount is for tax year	4 Federal income tax withheld	
\$		5	6 Taxable grants	
PAYER'S Federal identification number		7 Agriculture payments	8 Check if box 2 is trade or business income <input type="checkbox"/>	
RECIPIENT'S identification number				
RECIPIENT'S name				
Street address (including apt. no.)				
City, state, and ZIP code				
Account number (optional)				

Form **1099-G**

Cat. No. 14438M

Department of the Treasury - Internal Revenue Service

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